

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Method for Driving Halftone Display for a Liquid Crystal Display.

the specification of which (check one)

is attached hereto  
— was filed on \_\_\_\_\_ as United States Application Number  
or PCT International Application Number \_\_\_\_\_  
and was amended on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above identified specification, including claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

			Priority Claimed
<u>8-127173</u> (Number)	<u>Japan</u> (Country)	<u>22 May 1996</u> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

\_\_\_\_\_ (Application Number) \_\_\_\_\_ (Filing Date)

\_\_\_\_\_ (Application Number) \_\_\_\_\_ (Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose material information as defined in 37 CFR § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

\_\_\_\_\_ (Appl. Serial No.) \_\_\_\_\_ (Filing Date) \_\_\_\_\_ (Status)(patented, pending, abandoned)

\_\_\_\_\_ (Appl. Serial No.) \_\_\_\_\_ (Filing Date) \_\_\_\_\_ (Status)(patented, pending, abandoned)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Manny W. Schecter - 31,722      Marc D. Schecter - 28,989  
Jay P. Sbrollini - 36,266      James E. Murray - 20,915

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ADDITIONS TO COMBINED DECLARATION AND POWER OF ATTORNEY  
SIGNATURE BY FIRST AND SUBSEQUENT INVENTORS

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of sole or first inventor: Yasuhiro Kimura

Signature: Yasuhiro Kimura Date: 03/25/97

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Full Name of third joint inventor:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence:

Citizenship:

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Full Name of fourth joint inventor:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence:

Citizenship:

Post Office Address:

Full Name of fifth joint inventor:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence:

Citizenship:

Post Office Address:

Full Name of sixth joint inventor:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence:

Citizenship:

Post Office Address: